PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/066093

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN . OR SMALL ENTITY	
TOTAL CLAIMS			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A			ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			minus 20= *					X\$4]=		OR	X\$ 8.=	
INC	DEPENDENT C	LAIMS	• minus 3 = *				ŀ	X43=		OR	×8b=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		1 1		
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	+∂90=		
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	** 2	3	=		x\$ Q =	_	OR	×\$(8=	-
AME	Independent.	* 2	Minus	***		=		X43=	-	OR	126=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ 45 =		OR	-0A0-	(
								TOTAL			TOTAL ADDIT, FEE	
	- Turk 10 / 10 - 10 - 10 - 10 - 10 - 10 - 10 -	(Column 1)		DDIT. FEE				i				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		x\$9=		OR	x\$ 8=	
LME	Independent	*	Minus	AAR				X43=		OR	×86=	·
	FIRST PRESE	ULTIPLE DEP	TIPLE DEPENDENT CLAIM			!				+290=		
			•				, L	+145= TOTAL		OR	TOTAL	
•		a.,		G.			Α	DDIT. FEE		OR	ADDIT: FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST APPL											
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE.
WON	Total	*	Minus	**		=		x\$9=	-	OR	X\$ 8=	
WE	Independent	*	Minus	***		=		X13=		OR	X86	
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ 46=				
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+396≠	
44	If the "Highest Nu	mber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is	less tha	n 20, enter *20.	* A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		ber Previously Paid					er four	nd in the app	propriate box	in co	umņ 1.	